Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this ar amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Write	e the name that is on	Steven	
		government-issued are identification (for	First name	First name
	example, your driver's license or passport). Bring your picture		Т	
		Middle name	Middle name	
			Ryan	
	identification to your meeting with the trustee.		Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		de your married or den names.		
3.	youi num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-6530	

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 2 of 43

Debtor 1 Steven T Ryan Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
Include trade names and doing business as names	Business name(s)	Business name(s)
	EINs	EINs
Where you live	7611 Heathfiled Court	If Debtor 2 lives at a different address:
	Orlando, FL 32835 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Orange	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s)

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 3 of 43

Deb	tor 1	Steven T Ryan	Case number (if known)									
Par	t 2:	Tell the Court About Y	our Bankrı	ıptcy Ca	se							
7.	Bank	chapter of the ruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.									
	choo	sing to file under	☐ Chapte	r 7								
			☐ Chapte	r 11								
			☐ Chapte	r 12								
			■ Chapte	r 13								
8. How you will pay the fee			abou orde	it how yo r. If your	e entire fee when I file my pour may pay. Typically, if you a attorney is submitting your p address.	re paying the	fee yourself, you m	nay pay with cash, cashie	r's check, or money			
			☐ I nee	d to pay	the fee in installments. If y		is option, sign and	attach the Application for	Individuals to Pay			
				J	e in Installments (Official For	,	and the same of the same	(" (Ob (7. D	otano a fordara arang			
			but is	s not req applies to	It my fee be waived (You ma uired to, waive your fee, and o your family size and you are cation to Have the Chapter 7	may do so on e unable to pa	lly if your income is by the fee in installn	less than 150% of the off nents). If you choose this	icial poverty line option, you must fill			
9.	Have	you filed for	■ No.									
		ruptcy within the spears?	☐ Yes.									
		,		District		When		Case number				
				District		When		Case number				
				District		When		Case number				
10.		ny bankruptcy s pending or being	■ No									
	not fi you,	by a spouse who is ling this case with or by a business er, or by an tte?	☐ Yes.									
				Debtor				Relationship to you				
				District		When		Case number, if known				
				Debtor				Relationship to you				
				District		_ When		Case number, if known				
11.		ou rent your	■ No.	Go to I	ine 12.							
	resia	ence?	☐ Yes.	Has yo	our landlord obtained an evicti	on judgment a	against you and do	you want to stay in your r	residence?			
					No. Go to line 12.							
					Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	t About an Ev	riction Judgment Ag	gainst You (Form 101A) a	nd file it with this			

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 4 of 43

Deb	otor 1 Steven T Ryan				Case number (if known)		
Par	t 3: Report About Any Bu	sinesses	You Owr	as a Sole Proprie	etor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of bus	siness		
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a		Numb	per, Street, City, Sta	ate & ZIP Code		
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	ox to describe your business:		
	·			Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	I Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	e		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you in ns, cash-f S.C. 1116	ndicate that you are low statement, and f (1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	No. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am t	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	immediate attention?		necucu,	wity is it flooded:			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?			
					Number, Street, City, State & Zip Code		

Debtor 1 Steven T Ryan Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

П

court.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 6 of 43

Deb	tor 1 Steven T Ryan				Case number (if	known)				
Par	6: Answer These Quest	ions for Re	porting Purposes							
16.	What kind of debts do you have?		Are your debts primarily condividual primarily for a person			l in 11 U.S.C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.							
			■ Yes. Go to line 17.							
			Are your debts primarily bu money for a business or investigation.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you or	we that are not consum	ner debts or business o	debts				
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter	7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Dexpenses are paid that funds			y is excluded and administrative editors?				
	administrative expenses		□ No							
	are paid that funds will be available for		☐ Yes							
	distribution to unsecured creditors?									
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,00	0	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000				
40	Hann morals de vers									
19.	How much do you estimate your assets to	□ \$0 - \$50 □ \$50.00),000 - \$100,000	□ \$1,000,001 - : □ \$10,000,001 -		☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion				
	be worth?	\$100,0	01 - \$500,000 01 - \$1 million	\$50,000,001 - \$100,000,001	- \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you estimate your liabilities	□ \$0 - \$5	0,000 1 - \$100,000	□ \$1,000,001 - : □ \$10,000,001 -	•	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion				
	to be?	\$100,0	01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$10,000,001 = \$50,000,001 = \$100,000,001	- \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion				
Par	7: Sign Below									
	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.								
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.								
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).								
		I request re	elief in accordance with the c	hapter of title 11, Unite	d States Code, specific	ed in this petition.				
			case can result in fines up to 3571.			roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341,				
		Steven T Signature	Ryan		Signature of Debtor 2					
		Executed	March 22, 2016 MM / DD / YYYY		Executed on MM / D	D/YYYY				

(Case 6:16-bk-01900-KSJ Doc	: 1 Filed 03/22/16	Page / 0f 43
Debtor 1 Steven T Ryan		Case	e number (if known)
For your attorney, if you are represented by one		ited States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. §
f you are not represented by an attorney, you do not need to file this page.	342(b) and, in a case in which § 707(b)(4)(D in the schedules filed with the petition is income.	, , ,	o knowledge after an inquiry that the information
. 0	/s/ Allison Moscato	Date	March 22, 2016
	Signature of Attorney for Debtor		MM / DD / YYYY
	Allison Moscato		
	Printed name		
	John Roberts and Associates, PA		
	Firm name		
	549 North Wymore Road		
	Suite 209		
	Maitland, FL 32751		
	Number, Street, City, State & ZIP Code		
	Contact phone 321-972-8118	Email address	Allison@JohnRobertsandassociates. _com
	44673		
	Bar number & State		<u> </u>

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 8 of 43

	in this inform	ation to identify					
		ation to identify your	case:				
Deb	tor 1	Steven T Ryan First Name	Middle Name	Last Name			
Deb	tor 2	, not raine	date riame	2331.14.110			
(Spot	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Banl	kruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA			
Cas	e number						
(if kno						☐ Chec	k if this is an
						amei	nded filing
Off	icial For	m 106Sum					
Sui	mmary of	Your Assets a	and Liabilities an	d Certain Statistical Info	rmation		12/15
				are filing together, both are equally			
				ne information on this form. If you an k the box at the top of this page.	e filing amend	led sched	dules after you file
Part		rize Your Assets	•				
ran	3ullilla	ize rour Assets					
							assets of what you own
						Value	or what you own
1.	1a. Copy line	3: Property (Official For 55, Total real estate, for state of the form of t	orm 106A/B) rom Schedule A/B			\$	175,284.00
							22,215.52
							•
	1c. Copy line	63, Total of all property	y on Schedule A/B			\$	197,499.52
Part	2: Summa	rize Your Liabilities					
						Your	iabilities
						Amou	nt you owe
2.			laims Secured by Property			•	240 601 00
	2a. Copy the	total you listed in Colu	mn A, <i>Amount of claim,</i> at	the bottom of the last page of Part 1 of	Schedule D	\$	249,691.00
3.			Unsecured Claims (Officia			\$	0.00
				ns) from line 6e of Schedule E/F			
	3b. Copy the	total claims from Part	2 (nonpriority unsecured of	elaims) from line 6j of Schedule E/F		\$	12,328.00
				Your t	otal liabilities	\$	262,019.00
Part	3: Summa	rize Your Income and	Expenses				
4.		our Income (Official Fo				œ.	1,048.05
	Copy your co	mbined monthly incom	e from line 12 of Schedule	÷ I		\$	1,046.03
5.		our Expenses (Official				\$	1,580.00
		, , , , , , , , , , , , , , , , , , , ,				'	·
Part	4: Answer	These Questions for	Administrative and Stati	stical Records			
6.	,		er Chapters 7, 11, or 13?				
	☐ No. You	have nothing to report	on this part of the form. C	heck this box and submit this form to the	ne court with yo	our other s	schedules.
	Yes						
7.	What kind of	debt do you have?					
	■ Your de	bts are primarily con	sumer debts. Consumer o	debts are those "incurred by an individu	al primarily for	a persona	al, family, or
				g for statistical purposes. 28 U.S.C. §			•
	☐ Your de	bts are not primarily	consumer debts. You have	ve nothing to report on this part of the f	orm. <i>Check thi</i>	s <i>box</i> and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 9 of 43

Debtor 1 Steven T Ryan Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,166.67

Ocopy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 6:16	-bk-0190)0-KS	SJ Doc 1	Filed 03/2	22/16	Page	10 of 43		
Fill in this inform	mation to identify your	case and th	nis filin	g:						
Debtor 1	Steven T Ryan	A4: 1.11								
Debtor 2	First Name	Middle	Name		Last Name					
(Spouse, if filing)	First Name	Middle	Name		Last Name					
United States Ba	inkruptcy Court for the:	MIDDLE DI	STRIC	T OF FLORIDA						
Case number _										Check if this is ar amended filing
_	orm 106A/B e A/B: Prop	ertv								12/15
	eparately list and describe		n asset	only once. If an a	sset fits in more th	han one ca	tegory, list	the asset in th	e cat	
No. Go to Part Yes. Where is 1.1 7611 Heat	t 2. s the property? chfield Court if available, or other description		What	t is the property? Single-family ho Duplex or multi-	Check all that apply me unit building	·	amount of	any secured cla	aims	or exemptions. Put the on <i>Schedule D:</i> ecured by Property.
Orlando		335-0000		Manufactured or	mobile home		Current va	perty?		urrent value of the
City	State	ZIP Code	Who one.	Timeshare Other	erty n the property? Ch	eck	Describe t			\$175,284.00 ownership interest by the entireties, or
Orange				Debtor 2 only						
County			prop	At least one of the rinformation you erty identification	he debtors and anot wish to add about n number:	t this item,	such as loc		nmun	ity property
2 Add the doll	ar value of the portior	you own fo			n: WESTMOOF					
	ave attached for Part									\$175,284.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 11 of 43

Deb	tor 1 S	teven T Ry	an		Case number	(if known)	
3. C	ars, vans	trucks, trac	tors, sport utility ve	ehicles, motorcycles			
	No						
-	Yes						
3.1	Make:	GMC		Who has an interest in the property? Check one			aims or exemptions. Put
	Model:	Sierra		■ Debtor 1 only	tne am		ed claims on Schedule D: ims Secured by Property.
	Year:	2013		Debtor 2 only	Curren	nt value of the	Current value of the
	Approxir	nate mileage:	56750	Debtor 1 and Debtor 2 only		property?	portion you own?
	Other inf	ormation:		☐ At least one of the debtors and another			
	VIN# 3	GTP1VE06	DG310382	_		¢49.275.00	¢40.275.00
				☐ Check if this is community property (see instructions)		\$18,275.00	\$18,275.00
5 <i>A</i> .p	ages you 3: Descri	have attach	ed for Part 2. Write	rn for all of your entries from Part 2, includi that number here ems terest in any of the following items?			\$18,275.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
		,	Dining table with beds, 2 bureaus dishes, pots, pa	th six chairs, hutch, couch, love seat, r s, 4 end tables, ottoman, power tools, l ans, dishware, mower trimmer, basic g ellaneous household items.	hand tools,		\$400.00
<i>E</i>	•	Televisions a including cell		eo, stereo, and digital equipment; computers, nedia players, games	printers, scanne	ers; music collec	tions; electronic devices
E		Antiques and other collecti	l figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or oth illectibles	ner art objects; s	stamp, coin, or b	aseball card collections;
	xamples:	musical instr	ographic, exercise, ar	nd other hobby equipment; bicycles, pool table	s, golf clubs, sk	is; canoes and I	kayaks; carpentry tools;
_	- 163. DE	3011DE	cleate halls al	oves, bats, and other misc. football an	d softhall	٦	
			equipment.	oves, bats, and other misc. loctodii dir	u Suitball		\$50.00

Official Form 106A/B

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 12 of 43

De	ebtor 1	Steven T Ry	an		Case number	er (if known)	
10.	Firearr Examp		s, shotgu	ns, ammunition, a	and related equipment		
		Describe					
11.	Clothe Examp □ No		othes, fur	s, leather coats,	designer wear, shoes, accessories		
	Yes.	Describe	Clothe	es			\$50.00
	■ No □ Yes. Non-fa Examp ■ No				ngagement rings, wedding rings, heirloom jewelry, watch	nes, gems,	gold, silver
	■ No	her personal an			did not already list, including any health aids you did	d not list	
	for Pa		number	here	m Part 3, including any entries for pages you have a	ttached	\$600.00
Do	o you ov	wn or have any l	egal or e	quitable interes	t in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No		·		r home, in a safe deposit box, and on hand when you fil	e your petiti	ion
17.	Exam _l				accounts; certificates of deposit; shares in credit unions, unts with the same institution, list each.	, brokerage	houses, and other similar
	☐ No ■ Yes				Institution name:		
			17.1.	Checking	Chase Bank Acct. No. Ending: 3411		\$420.50
			17.2.	Savings	Chase Bank Acct. No. Ending: 1021		\$2,000.50
			17.3.	Checking	TD Bank Acct. No. Ending: 6698		\$919.52
18.		s, mutual funds , ples: Bond funds,			s b brokerage firms, money market accounts		
	■ No			Institution or issu	vor nama:		

☐ Yes...... Institution or issuer name:

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 13 of 43

De	ebtor 1	Steven T Ryan	Case number (if known)	
19.	-	blicly traded stock and interests in incorporated and unincorporated busines int venture	sses, including an interest in	an LLC, partnership,
	■ No □ Yes.	Give specific information about them Name of entity:	% of ownership:	
20.	Negotia	ment and corporate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' checks, promissory notes, and egotiable instruments are those you cannot transfer to someone by signing or delivered.	d money orders.	
	☐ Yes. (Give specific information about them Issuer name:		
21.	_Examp	nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or oth	er pension or profit-sharing plan	าร
	■ No □ Yes. I	List each account separately. Type of account: Institution name:		
22.	Your sl Examp	y deposits and prepayments nare of all unused deposits you have made so that you may continue service or us les: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), t		, or others
	■ No □ Yes.			
23.	Annuiti ■ No	es (A contract for a periodic payment of money to you, either for life or for a number	er of years)	
	☐ Yes	Issuer name and description.		
24.	26 U.S.0	s in an education IRA, in an account in a qualified ABLE program, or under a C. $\S\S$ 530(b)(1), 529A(b), and 529(b)(1).	qualified state tuition progra	ım.
	■ No □ Yes	Institution name and description. Separately file the records of any in	nterests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or future interests in property (other than anything listed in line 1),	and rights or powers exercis	sable for your benefit
	☐ Yes.	Give specific information about them		
26.		 copyrights, trademarks, trade secrets, and other intellectual property les: Internet domain names, websites, proceeds from royalties and licensing agree 	ements	
	☐ Yes.	Give specific information about them		
27.	Examp ■ No	es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association holdings, liquor li Give specific information about them	censes, professional licenses	
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
		Give specific information about them, including whether you already filed the return	ns and the tax years	
29.	■ No	support les: Past due or lump sum alimony, spousal support, child support, maintenance, of Give specific information	divorce settlement, property set	ttlement

Official Form 106A/B Schedule A/B: Property page 4

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 14 of 43

Debtor 1	Steven T Ryan		Case number (if known)	
Exan	amounts someone owes you nples: Unpaid wages, disability insurance payments, benefits; unpaid loans you made to someone		sick pay, vacation pay, workers' comp	ensation, Social Security
■ No □ Yes	. Give specific information			
	ests in insurance policies aples: Health, disability, or life insurance; health savi	ngs account (HSA)	r; credit, homeowner's, or renter's insura	ance
■ No				
☐ Yes	. Name the insurance company of each policy and li Company name:	st its value.	Beneficiary:	Surrender or refund value:
If you	nterest in property that is due you from someone are the beneficiary of a living trust, expect proceeds one has died.		nce policy, or are currently entitled to re	ceive property because
☐ Yes	. Give specific information			
Exan ■ No	us against third parties, whether or not you have inples: Accidents, employment disputes, insurance cl			
24 Othou	contingent and unliquidated claims of every nat	ure including co	unterclaims of the debtor and rights	to set off claims
■ No	. Describe each claim	ure, including col	unterclaims of the deptor and rights	to set on claims
■ No	inancial assets you did not already list . Give specific information			
	the dollar value of all of your entries from Part 4 Part 4. Write that number here		. • ,	\$3,340.52
Part 5: D	escribe Any Business-Related Property You Own or Hav	e an Interest In. List	any real estate in Part 1.	
	own or have any legal or equitable interest in any busine	ss-related property	?	
_	So to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Related Propyou own or have an interest in farmland, list it in Part 1.	perty You Own or Ha	ve an Interest In.	
′	ou own or have any legal or equitable interest in a b. Go to Part 7.	any farm- or comm	nercial fishing-related property?	
☐ Ye	ss. Go to line 47.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 7: D	escribe All Property You Own or Have an Interest in That	: You Did Not List Ab	pove	
	ou have other property of any kind you did not alr	eady list?		
■ No				
⊔ Yes	. Give specific information			
54. Add	the dollar value of all of your entries from Part 7	. Write that numb	er here	\$0.00
Official F	orm 106A/B So	hedule A/B: Pror	perty	page 5

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Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 15 of 43

Deb	tor 1 Steven T Ryan		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$175,284.00
56.	Part 2: Total vehicles, line 5	\$18,275.00		
57.	Part 3: Total personal and household items, line 15	\$600.00		
58.	Part 4: Total financial assets, line 36	\$3,340.52		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$22,215.52	Copy personal property total	\$22,215.52
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$197,499.52

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	rmation to identify your	case:		
Debtor 1	Steven T Ryan			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify th	e Property	You Claim	as Exempt
---------	-------------	------------	-----------	-----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	ount of the exemption you claim	Specific laws that allow exemption
7611 Heathfield Court Orlando, FL 32835 Orange County Legal Description: WESTMOOR PHASE 1 12/79 LOT 24. Line from <i>Schedule A/B</i> : 1.1	\$175,284.00	\$0.00 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(1); Fla. Stat. Ann. §§ 222.01 & 222.02
2013 GMC Sierra 56750 miles VIN# 3GTP1VE06DG310382	\$18,275.00	\$1,000.00	Fla. Stat. Ann. § 222.25(1)
Line from Schedule A/B: 3.1		100% of fair market value, up to any applicable statutory limit	
Dining table with six chairs, hutch, couch, love seat, recliner, 3 beds, 2	\$400.00	\$400.00	Fla. Const. art. X, § 4(a)(2)
bureaus, 4 end tables, ottoman, power tools, hand tools, dishes, pots, pans, dishware, mower trimmer, basic garden tools and other miscellaneous household items. Line from Schedule A/B: 6.1		100% of fair market value, up to any applicable statutory limit	
2 TVs, and computer Line from Schedule A/B: 7.1	\$100.00	\$100.00	Fla. Const. art. X, § 4(a)(2)
LINE HOITI SCHEUUIE PVD. 1.1		100% of fair market value, up to any applicable statutory limit	

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 17 of 43

Debtor	1 Steven T Ryan			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	eets, balls, gloves, bats, and other isc. football and softball	\$50.00	•	\$50.00	Fla. Const. art. X, § 4(a)(2)
e	quipment. ne from <i>Schedule A/B</i> : 9.1			100% of fair market value, up to any applicable statutory limit	
	hecking: Chase Bank Acct. No. nding: 3411	\$420.50		\$420.50	Fla. Const. art. X, § 4(a)(2)
	ne from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	avings: Chase Bank Acct. No. nding: 1021	\$2,000.50		\$29.50	Fla. Const. art. X, § 4(a)(2)
	ne from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption subject to adjustment on 4/01/16 and every No Yes. Did you acquire the property covery No Yes	3 years after that for ca	ases f	·	,

				5	
Fill in this information	on to identify you	ır case:			
	teven T Ryan	Middle Name Last Name		-	
Debtor 2 (Spouse if, filing) Fi	rst Name	Middle Name Last Name		-	
United States Bankrup	otcy Court for the	MIDDLE DISTRICT OF FLORIDA		-	
Case number					
(if known)					if this is an led filing
Official Form 10	neD				
		Who Hove Claims Secur	ad by Drapart	.,	40/45
Scriedule D.	Creditors	Who Have Claims Secur	ed by Propert	<u>y </u>	12/15
		f two married people are filing together, both are e , number the entries, and attach it to this form. On			
1. Do any creditors have	claims secured by	your property?			
☐ No. Check this	box and submit t	his form to the court with your other schedules	s. You have nothing else	to report on this form.	
■ Yes. Fill in all o	of the information	below.			
Part 1: List All Se	cured Claims				
each claim. If more than	one creditor has a p	nore than one secured claim, list the creditor separate articular claim, list the other creditors in Part 2. As muer according to the creditor's name.		Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Ally Financial		Describe the property that secures the claim:	\$15,597.00	\$18,275.00	\$0.00
Creditor's Name		2013 GMC Sierra 56750 miles VIN# 3GTP1VE06DG310382			
200 Renaissa Detroit, MI 48		As of the date you file, the claim is: Check all that apply. Contingent	J		
Number, Street, City,	State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or car loan)	secured		
Debtor 2 only					
☐ Debtor 1 and Debtor 2☐ At least one of the debtor 2☐ Debtor 1 and Debtor 2☐ Debtor 2☐ Debtor 2☐ Debtor 2☐ Debtor 2☐ Debtor 2☐ Debtor 3☐ Debtor	•	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Check if this claim recommunity debt		Other (including a right to offset) Car Loai	n		
	Opened 7/01/13 Last Active		_		
Date debt was incurred	1/11/16	Last 4 digits of account number 405	5		
2.2 Wells Fargo B	Bank Nv Na	Describe the property that secures the claim:	\$49,262.00	\$175,284.00	\$49,262.00
Creditor's Name		7611 Heathfield Court Orlando, FL	1		
		32835 Orange County			
		Legal Description: WESTMOOR PHASE 1 12/79 LOT 24.			
Po Box 31557	,	As of the date you file, the claim is: Check all that	_		
Billings, MT 5		apply. ☐ Contingent			
Number, Street, City,	State & Zip Code	☐ Unliquidated			
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2	•	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the deb	otors and another	☐ Judgment lien from a lawsuit			

Official Form 106D

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 19 of 43

Debtor 1 Steven T Ryan		Case nu	umber (if know)		
First Name Middle Na	ame Last Name				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Opened 8/01/07 Last Active 7/29/14	Last 4 digits of account number	1998			
2.3 Wells Fargo Hm Mortgag	Describe the property that secures the claim	ı: \$1	184,832.00	\$175,284.00	\$9,548.00
Creditor's Name 8480 Stagecoach Cir	7611 Heathfield Court Orlando, FL 32835 Orange County Legal Description: WESTMOOR PHASE 1 12/79 LOT 24. As of the date you file, the claim is: Check all apply.	-		\$173,20 4 .00	ψ3,3 -10.00
Frederick, MD 21701	☐ Contingent				
Number, Street, City, State & Zip Code Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only	An agreement you made (such as mortgage	or secured			
☐ Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's l	ien)			
At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	age			
Date debt was incurred Date Westmoor Homeowner's	Last 4 digits of account number	5161			
Assoc	Describe the property that secures the claim	1:	\$0.00	\$175,284.00	\$0.00
Creditor's Name	7611 Heathfield Court Orlando, FL 32835 Orange County Legal Description: WESTMOOR PHASE 1 12/79 LOT 24.				
Winter Park, FL 32793-4129	As of the date you file, the claim is: Check all apply. Contingent	hat			
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage	or secured			
☐ Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's l	ien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number	11HC			
Add the dollar value of your entries in Co If this is the last page of your form, add t Write that number here:	olumn A on this page. Write that number here: the dollar value totals from all pages.		\$249,691.00 \$249,691.00	1	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1,

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 20 of 43

Debtor 1 Steven T Ryan				Case number (if know)		
	First Name	Middle Name	Last Name			
	out or submit this	page.				
Name Address Ronald R. Wolfe & Associates		On which line in Part 1 did you enter the cred	ditor?	2.2		
	OB 25018 Impa, FL 3362	2-5018		Last 4 digits of account number 7820		2.3

Etti to	(h.t.a.tarfaran							
FIII IN	tnis inforn	nation to identify your ca	ase:					
Debto	r 1	Steven T Ryan First Name	Middle Name	Last Name				
Debto (Spouse		First Name	Middle Name	Last Name				
		nkruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA				
		-						
(if known	number						Check if t	
O((, -		400E/E						
		<u>m 106E/F</u>	.,, ., .,					
		E/F: Creditors V						12/15
any exe Schedu D: Cred the Con	cutory contr le G: Execut itors Who Ha tinuation Pa (if known).	acts or unexpired leases the ory Contracts and Unexpire ave Claims Secured by Prop	at could result in a claim. d Leases (Official Form 1 erty. If more space is net no information to report i	Also list executory 06G). Do not include eded, copy the Part y	Part 2 for creditors with NONPRI contracts on Schedule A/B: Propt e any creditors with partially secu- rou need, fill it out, number the en hat Part. On the top of any addition	erty (Officia red claims stries in the	al Form 100 that are lise boxes on	6A/B) and on ted in Schedule the left. Attach
		litors have priority unsecure						
	No. Go to		a ciamic agamer you.					
	☐ Yes.	- · · - · ·						
Part 2		of Your NONPRIORITY	Unsecured Claims					
3.	Do any cred	litors have nonpriority unse	cured claims against you	?				
	☐ No. You	have nothing to report in this p	part. Submit this form to the	court with your other	schedules.			
	Yes.							
4.	unsecured c	laim, list the creditor separate	y for each claim. For each	claim listed, identify w	who holds each claim. If a creditor that type of claim it is. Do not list cla than three nonpriority unsecured claim.	ims already	/ included ir	Part 1. If more lation Page of
4.1	Aargon	Δαηςν	Loot 4 digito	of account number	2697		\$	107.00
		Creditor's Name	Last 4 digits 6	of account number	2031	_	Φ	107.00
		ring Mountain Rd as, NV 89117	When was the	e debt incurred?		_		
		reet City State Zlp Code	As of the date	you file, the claim is	s: Check all that apply			
	Who incur	red the debt? Check one.	☐ Contingent					
	Debtor	•	_					
	☐ Debtor	2 only	☐ Unliquidate	ed				
	☐ Debtor	1 and Debtor 2 only	■ Disputed					
	☐ At least	one of the debtors and anoth	er Type of NONI	PRIORITY unsecured	claim:			
	☐ Check debt	if this claim is for a commu	nity	ans				
	Is the clair	n subject to offset?	Obligations not report as p		ration agreement or divorce that you	ı did		
	■ No		☐ Debts to pe	ension or profit-sharing	g plans, and other similar debts			
	☐ Yes		Other. Spe	Georg	e Washington University	Н		
4.2	Amex				8783			11,563.00
		Creditor's Name	Last 4 digits o	of account number	0100		\$	11,303.00
	Po Box		When was the	e debt incurred?	Opened 3/01/89 Last Active 2/18/16			
		reet City State Zlp Code	As of the date	you file, the claim is	s: Check all that apply			

Official Form 106 E/F

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 22 of 43

Debtor	1 Steven T Ryan		Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	· ·			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separ not report as priority claims	ation agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts		
	Yes	Other. Specify Credit	Card	-	
4.3	First Fed Credit & Col	Last 4 digits of account number	8836	\$	243.00
	Nonpriority Creditor's Name 5821 Hollywood Blvd Ste	When was the debt incurred?	Opened 3/01/10		
-	Hollywood, FL 33021 Number Street City State Zlp Code	As of the date you file, the claim is	:: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separ not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts		
	Yes	■ Other. Specify Collect Heart (tion Attorney The Greater Ft Laud Gr	-	
4.4	First Fed Credit & Col Nonpriority Creditor's Name	Last 4 digits of account number	8835	\$	306.00
	5821 Hollywood Blvd Ste Hollywood, FL 33021	When was the debt incurred?	Opened 3/01/10		
	Number Street City State ZIp Code	As of the date you file, the claim is	: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated			
	_	_			
	Debtor 1 and Debtor 2 only	■ Disputed Type of NONPRIORITY unsecured	claim:		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community		Ciaiii.		
	debt	☐ Student loans			
	Is the claim subject to offset?	not report as priority claims	ation agreement or divorce that you did		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Collect Heart (tion Attorney The Greater Ft Laud Gr	_	
4.5	First Fed Credit & Col	Last 4 digits of account number	8834	\$	109.00
	Nonpriority Creditor's Name 5821 Hollywood Blvd Ste Hollywood, FL 33021	When was the debt incurred?	Opened 3/01/10		
-	· · · · · · · · · · · · · · · · · · ·				

Official Form 106 E/F

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 23 of 43

Debtor 1 St	even T	Ryan		(Case n	umber (if know)		
Numb	er Street (City State Zlp Code	As of the date you file, the	claim is: C	heck al	I that apply		
Who i	incurred t	he debt? Check one.	☐ Contingent					
■ De	ebtor 1 onl	у	3					
□ De	ebtor 2 onl	y	☐ Unliquidated					
□ De	ebtor 1 and	d Debtor 2 only	■ Disputed					
☐ At	least one	of the debtors and another	Type of NONPRIORITY uns	secured cla	im:			
☐ Cr debt	neck if thi	s claim is for a community	☐ Student loans					
Is the	claim sul	bject to offset?	☐ Obligations arising out of not report as priority claims	a separatio	on agree	ement or divorce that y	ou did	
■ No	o		Debts to pension or profit	t-sharing pla	ans, and	d other similar debts		
☐ Ye	es		— Other openiy	Collectio Heart Gr	n Atto	orney The Greate	er Ft Laud	
		nounts for Each Type of U		number		Creditors with No		
Total the am of unsecured		certain types of unsecured clai	ms. This information is for stat	istical repo	orting p	urposes only. 28 U.S	.C. §159. Add the	amounts for each typ
	6a.	Domestic support obligations	s		6a.	Total claim	0.00	
Total claims from Part 1	6b.	Taxes and certain other debt	s you owe the government		6b.	\$	0.00	
	6c.	Claims for death or personal	injury while you were intoxicate	ed	6c.	\$	0.00	
	6d.	Other. Add all other priority uns	secured claims. Write that amoun	nt here.	6d.	\$	0.00	
	6e.	Total. Add lines 6a through 6d.			6e.	\$	0.00	
						Total Claim		
otal claims	6f.	Student loans			6f.	\$	0.00	
from Part 2	6g.	Obligations arising out of a s did not report as priority clair	eparation agreement or divorce	e that you	6g.	\$	0.00	
	6h.		aring plans, and other similar d	debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority	unsecured claims. Write that am	ount here.	6i.	\$	12,328.00	
	6j.	Total. Add lines 6f through 6i.			6j.	\$	12.328.00	

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 24 of 43

Fill in this infor					
Debtor 1	Steven T Ryan				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case number					
(if known)					Check if this is
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with Name, Number	whom you have th Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otato	Zii Oddc	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	_

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 25 of 43

Fill in this i	nformation to identify you	r case:			
Debtor 1	Steven T Ryan				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	j) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case number	er				
(if known)					☐ Check if this is an amended filing
Official	Form 106H				
Schedu	ule H: Your Cod	debtors			12/15
Arizona _	in the last 8 years, have yo , California, Idaho, Louisiana Go to line 3.				rty states and territories include)
3. In Colu in line 2 Form 1	2 again as a codebtor only	otors. Do not include your	spouse as a codebto	sure you have listed	ing with you. List the person show the creditor on Schedule D (Officia D, Schedule E/F, or Schedule G to
С	column 1: Your codebtor ame, Number, Street, City, State and	ZIP Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
3.1 N	ame			☐ Schedule D, lin☐ Schedule E/F,☐ Schedule G, li	line
	umber Street ity	State	ZIP Code		
3.2 N	ame			☐ Schedule D, lin☐ Schedule E/F,☐ Schedule G, li	line
	umber Street	State	ZIP Code	_	

Schedule H: Your Codebtors

					_				
	in this information to identify your obtor 1 Steven T Ry								
1 -	btor 2	,							
	buse, if filing)								
Uni	ited States Bankruptcy Court for the	e: MIDDLE DISTRICT C	OF FLORIDA						
	se number nown)		-			k if this is			
Ĺ	. ,					An amende A supplem	_	ng postpetitior	n chapter
_	("							following date	
-	fficial Form 106l				N	/IM / DD/ \	YYYY		
S	chedule I: Your Inc	ome							12/15
atta	use. If you are separated and you ch a separate sheet to this form. The describe Employment	On the top of any additi							
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-f	filing spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Empl	loyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	employed		
	employers.	Occupation	Superintendant						
	Include part-time, seasonal, or self-employed work.	Employer's name	Premier Builders	Int'l					
	Occupation may include student or homemaker, if it applies.	Employer's address	7075 Kingspointe Orlando, FL 3281		y, #6				
		How long employed t	here? Since 20	05		_			
Pai	Give Details About Mo	nthly Income							
	imate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	port for an	y line, writ	e \$0 in th	e space. I	nclude your n	on-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	for all em	ployers for	r that pers	son on the	lines below. I	f you need
					For Del	btor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	2	,166.67	\$	N/A	-
3.	Estimate and list monthly over	time pay.		3. +	§	0.00	+\$	N/A	_
1	Calculate gross Income Add li	ne 2 ± line 3		1	2 2 4	66 67	¢	NI/A	1

Deb	tor 1	Steven T Ryan	-	Ca	se number (if kr	nown)				
				F	or Debtor 1			Debtor 2		
	Cop	by line 4 here	4.	\$	2,166	6.67	\$	mig op	N/A	-
5.	l ist	all payroll deductions:								
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	34/	1.64	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	. \$		0.00	\$		N/A	_
	5e.	Insurance	5e.	. \$	295	5.30	\$		N/A	_
	5f.	Domestic support obligations	5f.			0.00	\$		N/A	_
	5g.	Union dues	5g.			0.00	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h	.+ \$		0.00	+ \$		N/A	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$		9.94	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,526	5.73	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a	. \$	-478	3.68	\$		N/A	
	8b.	Interest and dividends	8b	. \$	(0.00	\$		N/A	_
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	. \$		0.00	\$ \$		N/A N/A	_
	8e.	Social Security	8e.	. \$		0.00	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g.			0.00 0.00	\$		N/A N/A	_
	8h.	Other monthly income. Specify:	8h	.+ \$	(0.00	+ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	-478	3.68	\$		N/A	4
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1,048.05	+ \$		N/A =	\$	1,048.05
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		' —	1,01010				-	1,0 10100
11.	Star Incliothe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not scify:	r depe		, ,		•	Schedule		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	1,048.05
13.	Do	you expect an increase or decrease within the year after you file this form No.	?							y income
		Yes. Explain:								

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:					
Deb	otor 1 Steven T Ryan			Ch	eck if this is:	
					An amended filing	
	otor 2					wing postpetition chapter
(Spo	ouse, if filing)				13 expenses as of	the following date:
Unit	ted States Bankruptcy Court for the: MIDDLE I	DISTRICT OF FLORIDA			MM / DD / YYYY	
l	e number nown)					
	fficial Form 106J					
Sc	chedule J: Your Expens	ses				12/15
info	as complete and accurate as possible. It ormation. If more space is needed, attack mber (if known). Answer every question.	h another sheet to this t				
1.	Is this a joint case?					
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separat	e household?				
	☐ No ☐ Yes. Debtor 2 must file Official	l Form 106J-2, <i>Expenses</i>	for Separate House	ehold of D	ebtor 2.	
2.	Do you have dependents? ■ No					
	_ 1C3.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes
						□ No
						☐ Yes
						□ No □ Yes
			-			□ No
						☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ N	- -				
	<u> </u>	_				
Est exp	t 2: Estimate Your Ongoing Monthly imate your expenses as of your bankrup benses as of a date after the bankruptcy blicable date.	tcy filing date unless yo				
the	lude expenses paid for with non-cash go value of such assistance and have inclu				Your exp	ansas
(Uti	ficial Form 106l.)				Tour exp	
4.	The rental or home ownership expense payments and any rent for the ground or l		nclude first mortgage	4.	\$	0.00
	If not included in line 4:					
	4a. Real estate taxes			4a.	\$	0.00
	4b. Property, homeowner's, or renter's			4b.	\$	0.00
	4c. Home maintenance, repair, and up			4c.		80.00
_	4d. Homeowner's association or condo			4d.		0.00
5.	Additional mortgage payments for you	r residence, such as hor	ne equity loans	5.		0.00

ebtor 1 Ste	even T Ryan	Case numb	er (if known)	
. Utilities:				
	ctricity, heat, natural gas	6a.	\$	180.00
	ter, sewer, garbage collection		\$	25.00
	ephone, cell phone, Internet, satellite, and cable services		\$	170.00
	er. Specify:		\$	0.00
	housekeeping supplies		\$	450.00
	and children's education costs		\$ 	
		_	\$ 	0.00
•	laundry, and dry cleaning		·	40.00
	care products and services		\$	55.00
	and dental expenses	11.	\$	0.00
	tation. Include gas, maintenance, bus or train fare.	12.	Q	300.00
	elude car payments.		·	
	ment, clubs, recreation, newspapers, magazines, and books		\$	25.00
	e contributions and religious donations	14.	\$	0.00
Insurance				
	clude insurance deducted from your pay or included in lines 4 or 20.		Φ.	<u></u>
	insurance	15a.	·	0.00
	alth insurance	15b.	·	0.00
15c. Veh	nicle insurance	15c.	\$	158.00
15d. Oth	er insurance. Specify:	15d.	\$	0.00
. Taxes. Do	o not include taxes deducted from your pay or included in lines 4 or 2	0.		
Specify:	• • •	16.	\$	0.00
. Installme	nt or lease payments:			
17a. Car	payments for Vehicle 1	17a.	\$	0.00
17b. Car	payments for Vehicle 2	17b.	\$	0.00
	or Specific	17c.	\$	0.00
	er. Specify:	17d.	\$	0.00
	ments of alimony, maintenance, and support that you did not re			0.00
	from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form		\$	0.00
	ments you make to support others who do not live with you.	1001).	\$	0.00
Specify:	monto you make to capport outlore time as not into than you.	19.	Ψ	0.00
	I property expenses not included in lines 4 or 5 of this form or c		ur Income	
	tgages on other property	20a.		0.00
	al estate taxes	20b.		0.00
		20c.	·	
	perty, homeowner's, or renter's insurance			0.00
	ntenance, repair, and upkeep expenses	20d.		0.00
	neowner's association or condominium dues	20e.	·	0.00
 Other: Sp 	·	21.	+\$	37.00
Alarm S	ervice		+\$	60.00
Colorates	very monthly eveness			
	your monthly expenses		Φ.	4 500 00
	lines 4 through 21.	2010	\$	1,580.00
22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	
22c. Add	ine 22a and 22b. The result is your monthly expenses.		\$	1,580.00
0-1	are an examinate the second	L		
	your monthly net income.		_	
	by line 12 (your combined monthly income) from Schedule I.	23a.		1,048.05
23b. Cop	by your monthly expenses from line 22c above.	23b.	-\$	1,580.00
		Г		
	stract your monthly expenses from your monthly income.		Φ.	-531.95
The	result is your monthly net income.	23c.	\$	-531.95
For exampl	expect an increase or decrease in your expenses within the year are, do you expect to finish paying for your car loan within the year or do you expend to the terms of your mortgage?	after you file this ct your mortgage pay	form? ment to increase	or decrease because of a
_				
■ No.				

riii in this inio	rmation to identify your	case:		
Debtor 1	Steven T Ryan			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
		widdie Name	Last Name	
United States B	Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For	<u>m 106Dec</u>			
Declara	tion About a	ın Individual	Debtor's Schedules	12/15
f two married p	people are filing togethe	r, both are equally respo	onsible for supplying correct information.	
•				
			s or amended schedules. Making a false s	
	ey or property by fraud i 18 U.S.C. §§ 152, 1341, 1		kruptcy case can result in fines up to \$250	0,000, or imprisonment for up to 20
years, or both.	10 0.3.0. 99 132, 1341,	1519, and 3571.		
Sid	gn Below			
0.5				
Did you n	ay or agree to hay some	one who is NOT an attor	ney to help you fill out bankruptcy forms	2
Dia you p	ay or agree to pay some	one who is NOT all alloi	ney to help you his out bank uptcy forms	•
■ No				
_				
☐ Yes.	Name of person		Attach <i>Bankruptcy Pe</i> and <i>Signature</i> (Official	etition Preparer's Notice, Declaration,
			and Signature (Official	1 01111 1 1 9).
		that I have read the sum	imary and schedules filed with this declar	ation and
that they a	re true and correct.			
X /s/ Ste	even T Ryan		Х	
	n T Ryan		Signature of Debtor 2	
	ure of Debtor 1		5	
5 .			Dete	
Date	March 22, 2016		Date	

Fill in this in	formation to identify you	r case:			
Debtor 1	Steven T Ryan	Middle Norse	Leat Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA		
Case number					heck if this is an mended filing
Stateme Be as compleinformation.	te and accurate as poss	, attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write yo	
Part 1: Giv	ve Details About Your Ma	arital Status and Where You	ı Lived Before		
1. What is y	our current marital statu	us?			
☐ Mari	ried married				
2. During th	ne last 3 years, have you	lived anywhere other than	where you live now?		
■ No □ Yes	List all of the places you	lived in the last 3 years. Do n	ot include where you live nov	v.	
Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
				nity property state or territor ico, Texas, Washington and V	
■ No □ Yes.	. Make sure you fill out Sc	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2 Ex	plain the Sources of You	ır Income			
Fill in the	total amount of income yo	nployment or from operating our received from all jobs and a have income that you receive	all businesses, including par		ndar years?
□ No					
■ Yes.	Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	y 1 of current year until filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Steven T Ryan Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) ☐ Wages, commissions, \$-1,299.35 ☐ Wages, commissions, bonuses, tips bonuses, tips Operating a business ☐ Operating a business For last calendar year: \$26,000.00 Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$20,101.67 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$33,921.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

Del	otor 1 Steven T Ryan	Case number (if known)					
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payr	nent for	
	Ally Financial 200 Renaissance Ctr Detroit, MI 48243	1/19/16 2/19/16	\$447.54	\$15,597.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repay ☐ Suppliers of ☐ Other	yment	
7.	Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general p corporations of which you are an officer, directincluding one for a business you operate as a support and alimony.	artners; relatives of any generator, person in control, or o	neral partners; partners wner of 20% or more	erships of which your of their voting sec	ou are a general pourities; and any	partner; managing agent,	
	■ No□ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment	
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co ■ No □ Yes. List all payments to an insider		yments or transfer a	any property on a	ccount of a deb	t that benefited a	
	Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for th		
Pa 1	Within 1 year before you filed for bankrup List all such matters, including personal injur- modifications, and contract disputes.	tcy, were you a party in a					
	☐ No ■ Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of the	case	
	Wells Fargo Bank NA v. Steven T. Ryan 2015-CA-002782-O	Foreclosure	Orange County Court 425 North Oran Orlando, FL 32	nge Ave.,	■ Pending □ On appeal □ Concluded		
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		erty repossessed, t	foreclosed, garnis	shed, attached,	seized, or levied?	
	■ No □ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property Explain what happene	d	Date		Value of the property	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.	ptcy, did any creditor, inc		nancial institutio	n, set off any am	nounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amoun	
				lanei	1		

■ No □ Yes. Fill in the details for each gift.	
No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per personal No Yes. Fill in the details for each gift.	son?
 ☐ Yes Part 5: List Certain Gifts and Contributions Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per personal No ☐ Yes. Fill in the details for each gift. 	son?
Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per personal No Yes. Fill in the details for each gift.	son?
 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per personal No Yes. Fill in the details for each gift. 	son?
■ No □ Yes. Fill in the details for each gift.	son?
	., .
Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts	e Value
Person to Whom You Gave the Gift and Address:	
 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more the No 	han \$600 to any charity
☐ Yes. Fill in the details for each gift or contribution.	
Gifts or contributions to charities that total more than \$600 Dates you contributed	Value
Charity's Name Address (Number, Street, City, State and ZIP Code)	
Part 6: List Certain Losses	
5. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of disaster, or gambling?	theft, fire, other
■ No	
☐ Yes. Fill in the details.	
Describe the property you lost and Describe any insurance coverage for the loss Date of your	Value of property
how the loss occurred Include the amount that insurance has paid. List	lost
pending insurance claims on line 33 of Schedule A/B: Property.	
Part 7: List Certain Payments or Transfers	
Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any proconsulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy	
□ No	
□ No ■ Yes. Fill in the details.	
Person Who Was Paid Description and value of any property Date payment	Amount of
Address transferred or transfer was	
Email or website address Person Who Made the Payment, if Not You made	
John Roberts and Associates, PA Attorney Fees 2/11/16	\$1,700.00
549 North Wymore Road	Ψ1,100.00
Suite 209	
Maitland, FL 32751 Maitland, FL 32751	
Allison@JohnRobertsandassociates.c	
om	

Debtor 1	Steven	T R	van
----------	--------	-----	-----

Case number (if known)

17.	 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No							
	☐ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and vatransferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment		
				_				
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already lis No	ness or financial affa as security (such as t	irs? he granting of a					
	☐ Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and va property transferre	any property or s received or debts xchange	Date transfer was made				
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.		y property to a	self-settled t	rust or similar device	of which you are a		
	Name of trust	Description and value of the property transferred Date Transfer wa						
				,		made		
Par	t 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Sto	orage Units				
20.	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or of houses, pension funds, cooperatives, association. No	ther financial accour	nts; certificates	of deposit;				
	Yes. Fill in the details.							
		st 4 digits of count number	Type of account instrument	cl m	ate account was losed, sold, loved, or ansferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, ar	ıy safe depos	sit box or other deposi	tory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accommoder, Strate and ZIP Code)		Describe the	e contents	Do you still have it?		
22.	you filed for bankrupto	y						
	No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?		

Debtor 1 Steven T Ryan Case number (if known)

Pa	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty yo	u borrowed from, are storing fo	or, or hold in trust		
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	cribe the property	Value		
Pai	t 10: Give Details About Environmental Inform	nation					
For	the purpose of Part 10, the following definitions	s apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, grour	_	•			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		l law,	whether you now own, operate,	or utilize it or used		
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardou	ıs was	ste, hazardous substance, toxic	substance,		
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n the	y occurred.			
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e und	er or in violation of an environr	nental law?		
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	y release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admini	istrative proceeding under any env	/ironn	nental law? Include settlements	and orders.		
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nati	ure of the case	Status of the case		
Pa	t 11: Give Details About Your Business or Cor	nnections to Any Business					
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of	the following connections to ar	ny business?		
	■ A sole proprietor or self-employed in a	trade, profession, or other activity	, eith	er full-time or part-time			
	☐ A member of a limited liability company	y (LLC) or limited liability partners	hip (L	LP)			
	☐ A partner in a partnership						
	☐ An officer, director, or managing execu	tive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation						

Official Form 107

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 37 of 43

Debtor 1	Steven T Ryan	Case number (if known)							
-	No. None of the above applies. Go to	o Part 12.							
= \	Yes. Check all that apply above and fill in the details below for each business.								
Addr	ness Name ress per, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.						
	ren T Ryan I Heathfiled Court	Handyman Services	Dates bu	siness existed XXX-XX-6530					
	ndo, FL 32835	None.	From-To	2014-current					
Name Addr		Date Issued							
Part 12:	Sign Below								
are true ar with a ban 18 U.S.C. {	nd correct. I understand that making kruptcy case can result in fines up t §§ 152, 1341, 1519, and 3571.	Financial Affairs and any attachments, and a false statement, concealing property, o o \$250,000, or imprisonment for up to 20	r obtaining m	oney or property by fraud in connection					
Steven T	en T Ryan 「Ryan e of Debtor 1	Signature of Debtor 2							
Date Ma	arch 22, 2016	Date							
Did you at ■ No □ Yes	tach additional pages to <i>Your Statei</i>	ment of Financial Affairs for Individuals Fi	iling for Bankı	ruptcy (Official Form 107)?					
Did you pa ■ No	ay or agree to pay someone who is n	oot an attorney to help you fill out bankrup	otcy forms?						
☐ Yes. Na	ame of Person Attach the Bank	kruptcy Petition Preparer's Notice, Declaratio	n, and Signatu	re (Official Form 119).					

Fill in this information to identify your case:							
Debtor 1	Steven T Ryan						
Debtor 2 (Spouse, if filing)							
United States E	United States Bankruptcy Court for the: Middle District of Florida						
Case number (if known)							

Check	as directed in lines 17 and 21:
	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:	Calculate Your Average Monthly Income
rait i.	Calculate Your Average Monthly income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - ☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					Colui Debt e	mn A or 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, ove all payroll deductions).	rtime	, and commission	ons (b	efore \$	§	2,166.67	\$
 Alimony and maintenance payments. Do not i Column B is filled in. 	nclud	e payments from	a spo	use if \$	B	0.00	\$
4. All amounts from any source which are regul of you or your dependents, including child su from an unmarried partner, members of your hou and roommates. Include regular contributions fro filled in. Do not include payments you listed on li	u ppo i useho om a s	rt. Include regular old, your depende spouse only if Co	conti nts, p	ibutions arents, B is not	§	0.00	\$
 Net income from operating a business, profession, or farm 		Debtor 1					
Gross receipts (before all deductions)	\$	1,66	4.48				
Ordinary and necessary operating expenses	-\$	2,14	3.16				
Net monthly income from a business, profession, or farm	\$		0.00	Copy here -> \$		0.00	\$
6. Net income from rental and other real proper	ty	Debtor 1					
Gross receipts (before all deductions)		\$ 0.00					
Ordinary and necessary operating expenses		-\$ 0.00					
Net monthly income from rental or other real pro	perty	\$ 0.00	Copy	/ here -> \$	5	0.00	\$

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor	Steven T Ryan	Case numb	er (<i>if known</i>)		
		Column A Debtor 1		Column B Debtor 2 or non-filing spous	se
7.	Interest, dividends, and royalties	\$	0.00	\$	
8.	Unemployment compensation	\$	0.00	\$	
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:				
	For you\$				
	For your spouse\$				
	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$	0.00	\$	
	Income from all other sources not listed above. Specify the source and amour Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put th total below.				
		\$	0.00	\$	
		\$	0.00	\$	
	Total amounts from separate pages, if any.	+ \$	0.00	\$	
	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. \$	2,166.67	+ \$	= \$	2,166.67 Total average monthly income
12. 13.	Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one:			\$_	2,166.67
	You are not married. Fill in 0 below.				
	☐ You are married and your spouse is filing with you. Fill in 0 below.				
	You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT redependents, such as payment of the spouse's tax liability or the spouse's su				
	Below, specify the basis for excluding this income and the amount of income adjustments on a separate page.	e devoted to ea	ch purpose	. If necessary, list	additional
	If this adjustment does not apply, enter 0 below. \$ \$ \$ +\$		 		
	Total\$	0.0	00Co	py here=> -	0.00
14.	Your current monthly income. Subtract line 13 from line 12.			\$_	2,166.67
15.	Calculate your current monthly income for the year. Follow these steps:				
	15a. Copy line 14 here=>			\$_	2,166.67
	Multiply line 15a by 12 (the number of months in a year).				x 12
	15b. The result is your current monthly income for the year for this part of the fo	orm		\$	26,000.04

Case 6:16-bk-01900-KSJ Doc 1 Filed 03/22/16 Page 40 of 43

Debt	or 1	Steven T Ryan	Case number	er (if known)
16	. Cal	ulate the median family income that applies to	you. Follow these steps:	
	16a	Fill in the state in which you live.	FL	
	16b	Fill in the number of people in your household.	1	
		Fill in the median family income for your state and		\$ 43,085.00
		To find a list of applicable median income amour instructions for this form. This list may also be av	ts, go online using the link specified in the	
17	. Hov	do the lines compare?	anable at the bankruptcy clerk's office.	
	17a	•	On the top of page 1 of this form, check be NOT fill out <i>Calculation of Your Disposable</i>	ox 1, Disposable income is not determined under e Income (Official Form 122C-2).
	17b		culation of Your Disposable Income (Off	osable income is determined under 11 U.S.C. § ficial Form 122C-2). On line 39 of that form,
Par	t 3:	Calculate Your Commitment Period Under 1	I U.S.C. § 1325(b)(4)	
18.	Cop	y your total average monthly income from line	11.	\$\$
19.	con	uct the marital adjustment if it applies. If you a end that calculating the commitment period under use's income, copy the amount from line 13.	e married, your spouse is not filing with yo 11 U.S.C. § 1325(b)(4) allows you to dedu	u, and you ct part of your
		If the marital adjustment does not apply, fill in 0 c	n line 19a.	-\$0.00
	19b	Subtract line 19a from line 18.		\$\$
20	Cal	culate your current monthly income for the yea	Follow these steps:	
20.			Tollow triese steps.	_{\$} 2,166.67
		Multiply by 12 (the number of months in a year).		x 12
				X 12
	20b	The result is your current monthly income for the	year for this part of the form	\$26,000.04_
	200	Copy the modian family income for your state on	d aize of household from line 16e	\$ 43,085.00
	200	Copy the median family income for your state and	1 Size of flousefloid from liftle foc	Ψ
	21.	How do the lines compare?		
		■ Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ise ordered by the court, on the top of pag	ge 1 of this form, check box 3, The commitment
		Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise ordered by the court, on the	ne top of page 1 of this form, check box 4, The
Par	t 4:	Sign Below		
	By s	igning here, under penalty of perjury I declare that	the information on this statement and in a	ny attachments is true and correct.
)		Steven T Ryan		
		even T Ryan nature of Debtor 1		
		March 22, 2016		
	lf vo	MM / DD / YYYY u checked 17a, do NOT fill out or file Form 122C-	<u>)</u>	
	-	u checked 17b, fill out Form 122C-2 and file it with		our current monthly income from line 14 above.

Debtor 1 Steven T Ryan

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2015 to 02/29/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Real Simple

Income by Month:

6 Months Ago:	09/2015	\$2,000.00
5 Months Ago:	10/2015	\$3,000.00
4 Months Ago:	11/2015	\$2,000.00
3 Months Ago:	12/2015	\$2,000.00
2 Months Ago:	01/2016	\$2,000.00
Last Month:	02/2016	\$2,000.00
	Average per month:	\$2,166.67

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Handy Man Services

Income/Expense/Net by Month:

•	Date	Income	Expense	Net
6 Months Ago:	09/2015	\$1,958.89	\$4,578.21	\$-2,619.32
5 Months Ago:	10/2015	\$2,802.98	\$1,156.09	\$1,646.89
4 Months Ago:	11/2015	\$0.00	\$1,122.62	\$-1,122.62
3 Months Ago:	12/2015	\$625.00	\$1,228.34	\$-603.34
2 Months Ago:	01/2016	\$2,600.00	\$3,899.35	\$-1,299.35
Last Month:	02/2016	\$2,000.00	\$874.32	\$1,125.68
	Average per month:	\$1,664.48	\$2,143.16	
			Average Monthly NET Income:	\$-478.68

Steven T Ryan 7611 Heathfiled Court Orlando, FL 32835 Westmoor Homeowner's Assoc POB 4129 Winter Park, FL 32793-4129

Allison Moscato John Roberts and Associates, PA 549 North Wymore Road Suite 209 Maitland, FL 32751

Aargon Agncy 8668 Spring Mountain Rd Las Vegas, NV 89117

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Amex Po Box 297871 Fort Lauderdale, FL 33329

First Fed Credit & Col 5821 Hollywood Blvd Ste Hollywood, FL 33021

Ronald R. Wolfe & Associates POB 25018 Tampa, FL 33622-5018

Wells Fargo Bank Nv Na Po Box 31557 Billings, MT 59107

Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	Steven T Ryan		Case No.	
	-	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENS	ATION OF ATTOR	NEY FOR DE	EBTOR(S)
1.	1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for service be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:			
	For legal services, I have agreed to accept		\$	4,700.00
	Prior to the filing of this statement I have received		\$	1,700.00
	Balance Due		\$	3,000.00
2.	\$_310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	 ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm, copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 			
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:			
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; e. [Other provisions as needed] 			
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:				
CERTIFICATION				
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.				
N	March 22, 2016	/s/ Allison Moscato	0	
Date		Allison Moscato 4		
		Signature of Attorney John Roberts and		
		549 North Wymore		
		Suite 209 Maitland, FL 32751	1	
		321-972-8118 Fax	: 321-972-8197	
		Allison@JohnRob Name of law firm	ertsandassociat	es.com
		Traine of taw firm		